

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
Before the Board of Patent Appeals and Interferences

In re Patent Application of

Atty Dkt. 2802-34 (AMK)

C# M#

Confirmation No. 6620

TC/A.U.: 3694

UNDERSTEIN

Serial No. 10/510,123

Examiner: A. Basit

Filed: October 4, 2004

Date: April 30, 2008

Title: MULTI-DEPOSITORY FINANCIAL TRANSACTIONS

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

☐ **Correspondence Address Indication Form Attached.**

☒ **NOTICE OF APPEAL**

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences

from the last decision of the Examiner twice/finally rejecting applicant's claim(s). \$510.00 (1401)/\$255.00 (2401) \$ 255.00

☐ An appeal **BRIEF** is attached in the pending appeal of the above-identified application \$510.00 (1402)/\$255.00 (2402) \$

☐ Credit for fees paid in prior appeal without decision on merits -\$ ( )

☐ A reply brief is attached. (no fee)

☐ Pre-Appeal Brief Request for Review form attached.

☐ Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)  
One Month Extension \$120.00 (1251)/\$60.00 (2251)  
Two Month Extensions \$460.00 (1252)/\$230.00 (2252)  
Three Month Extensions \$1050.00 (1253)/\$525.00 (2253)  
Four Month Extensions \$1640.00 (1254)/\$820.00 (2254) \$

☐ "Small entity" statement attached.

Less month extension previously paid on -\$ ( )

**TOTAL FEE ENCLOSED \$ 255.00**

☐ **CREDIT CARD PAYMENT FORM ATTACHED.**

Any future submission requiring an extension of time is hereby stated to include a petition for such time extension. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our **Account No. 14-1140**. A duplicate copy of this sheet is attached.

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NIXON & VANDERHYTE P.C.

By Atty: Alan M. Kagen, Reg. No. 36,178

Signature: /Alan M. Kagen/